

SCAN/EMAIL to info@athensuptownrealty.com

FOR OFFICIAL USE ONLY

Date Received://	
Reviewed by:	
Comments:	

HOUSING APPLICATION & PROSPECTIVE RESIDENT INFORMATION

Applications are considered for all prospective residents, and applicants are treated during the agreement, without regard to race, color, religion, sex, national origin, age, disability, or any other prohibited basis of discrimination as provided under applicable state and federal law.

Rental Location(s) Applying For:						
APPLICANT INFORMATION						
Full Name include all names you use	e(d):					
Current Street Address:						
City:	State:			Zip:		
Phone:	Email:					DOB://
SSN:	Driv	er's Lice	nse #:		Stat	re:
Vehicle Make:	_ Model: _			Color:		Year:
License Plate Number/State:						
Vehicle Make:	_ Model: _			Color:		Year:
License Plate Number/State:						
Do you have a Parent or Legal Guard	ian that wil	l act as d	a Co-signer	Ś		
U YES U	NO		□ N/A			
EMERGENCY CONTACT						
Full Name:		Street A	ddress:			
City:	State:			Zip:		
Phone:	Email:					
ADDITIONAL OCCUPANTS						
Full Name:		Age:	Relationsh	nip to Applicant:		



EMPLOYMENT / STUDENT INFORMATION

Company:			_ Phone:			
Address:		Rate of Pay \$				
Name of Supervisor:	Supervisor's Phone:					
Dates Employed at This Job:	Position or Title:					
If you are a student, what is your major area of study?	?					
Academic Advisor	_ Anticipated Date of Graduation					
MISCELLANEOUS						
Do you have a pet?		Yes		No		
Do you smoke?		Yes		No		
Have you ever:						
Filed for bankruptcy?		Yes		No		
Been evicted or foreclosed on?		Yes		No		
Been convicted of a crime?		Yes		No		
Been sued?		Yes		No		
Explain any "yes" listed above:						
SIGNATURE/CERTIFICATION						
I certify that the facts set forth in this application are tunderstand that any misrepresentations, falsifications, denial of my application or removal from consideration application from my credit sources, credit bureaus, creferences. This permission will survive the expiration of understand the foregoing, and that I seek to become	, or omission on. I authori urrent and p of my tenand	s on this ap ze verificat previous lar cy. I represe	oplication can be ion of the informa ndlords and emplo ent and warrant th	grounds for immediate tion provided in this byers and personal nat I have read and fully		
Signature:			Date:			